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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/562,110			ing Date 01/2007	To be Mailed		
APPLICATION AS FILED – PART I (Column 1) (Column 2)								SMALL ENTITY				HER THAN ALL ENTITY		
Г	FOR		NUMBER FILED		NUMBER EXTRA		Г	RATE (\$)	FEE (\$)	П	RATE (\$)	FEE (\$)		
	BASIC FEE (37 CFR 1,16(a), (b),	or (c))	N/A		N/A		ı	N/A		1	N/A			
	SEARCH FEE (37 CFR 1 16(k), (i), a	or (m))	N/A		N/A			N/A]	N/A			
	EXAMINATION FE (37 CFR 1,16(o), (p),	E or (q))	N/A		N/A			N/A			N/A			
	TAL CLAIMS CFR 1.16(i))		minus 20 =		•			x \$ =		OR	x s =			
	EPENDENT CLAIM CFR 1.16(h))		minus 3 =		•]	X \$ =]	X \$ =			
	APPLICATION SIZE (37 CFR 1.16(s))	FEE she is \$ add	If the specification and draw sheets of paper, the applica is \$250 (\$125 for small entit additional 50 sheets or fract 35 U.S.C. 41(a)(1)(G) and 3			n size fee due for each n thereof. See								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))										1				
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL		1	TOTAL			
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)									SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
AMENDMENT	01/20/2011	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1.16())	• 17	Minus	·· 20		= 0	ı	x s =		OR	X \$52=	0		
	independent (37 CFR 1.16(h))	• 1	Minus	3		- 0		X \$ =		OR	X \$220=	0		
	Application Size Fee (37 CFR 1.16(s))													
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR				
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0		
(Column 1) (Column 2) (Column 3)														
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)		
	Total (37 CFR 1,16())	*	Minus					x \$ =		OR	x s =			
	Independent (37 CFR 1.16(h))		Minus	***				X \$ =		OR	X \$ =			
Z	Application Size Fee (37 CFR 1.16(s))]				
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16(j))						l			OR				
										OR	TOTAL ADD'L FEE			
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For "N THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For "N THIS SPACE is less than 3, enter "3". "CATHERINE d. SMITH/ "The "Highest Number Previously Paid For "(Total or independent) is the highest number found in the appropriate box in column 1.													

This collection of information is equined by 37 CFR. 11.6. The information is required to obtain or retain a breast by the public within his in fell care by the USFDTO to modestal an explaination. Confidentifying is ownered by 85 US of 22 and 37 CFR. 11.6. This collection is destinated to the 2 servicture to complete its protection form to the USFDTO. Time will vary depending upon the included care. Any comments on the amount of time you require to complete the form and/or suggestions for reducing the burden. Also be sent to the CEMP (information Officer. U.S. Petent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22913-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Parlams, P.O. Box 1450, Mexandria, VA 22913-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Parlams, P.O. Box 1450, Mexandria, VA 22913-1450.